



APPLICATION FOR COUNTY BOARDS, COMMISSIONS, COMMITTEES AND COUNCILS

Name of Board, Commission, Council or Committee in which you have an interest:

Name:	Supervisor District:
Address:	
Telephone-home:	Telephone-work:
E-mail:	Fax:

Why do you want to serve on this Board?

(Note: The term "Board" will be used to cover the terms "Boards, Commissions, Councils and Committees.")

What skills would you bring to the Board?

Indicate type or years of experience, in reference to the board, commission or committee in which you are interested:

# YEARS EXPERIENCE	# YEARS EXPERIENCE
Management	Building Professional
Private	Architect
Non-profit	Engineer
Government	Contractor
	Other

# YEARS EXPERIENCE	# YEARS EXPERIENCE
Legal	Artist
Specialty	Performing
Financial	Visual
Specialty	Other
Scientific	Recreation
Specialty	Parks
Medical	Trails
Specialty	Active
Educator	Passive
Specialty	Other
Environmental	Public Relations
Specialty	Training
Land Use Professional	Mediation
Specialty	Planning
	Other

What prior experience do you have on Boards, Commissions, Councils or Committees?

Provide name of the Board, dates of service, offices held and whether policy or advisory

List current and past employment:

Name of employer:	Job title:
Brief description of duties:	
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Name of employer:	Job title:
Brief description of duties:	

Are you able to commit at least _____ hours per month in meeting time, plus preparation and travel time?

____ Yes ____ No

Are you willing to abide by the Open Meeting and Open Records laws of the State of Arizona?

____ Yes ____ No

Are you willing to sign an oath of allegiance?

____ Yes ____ No

Signature	Date
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Your application will be placed in our files and reviewed as we have openings. Openings on some boards occur infrequently due to length of up to 4-year terms.

**Please return this completed application to:
Coconino County Board of Supervisors
219 East Cherry Avenue
Flagstaff, AZ 86001**